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Responses to Questions for the Record from Representative Mike Kelly (PA-16)

- 1) The OIG report underscores the wide variability in State Agency surveyors' capabilities and understanding of hospice rules, especially for complaint surveys. This is not surprising, particularly given the hospice surveyor must understand and interpret over 240 regulatory elements related to the hospice survey process of 20 conditions and 80 standards, and that SA surveyors frequently perform surveys on multiple provider types.

Both the National Hospice and Palliative Care Organization (NHPCO) and the National Association for Home Care and Hospice reference the need to improve the survey process to prevent confusion and ensure quality care for hospice patients.

Question 1: How can Congress and/or CMS assure "competency" of hospice surveyors for hospice beyond simply the training and mentoring processes in place today?

Answer 1: It would be optimal for surveyors to have adequate experience in their designated area of survey. An extensive training program for surveyors could include the following: case examples, case studies (from previous survey finding examples), and knowledge checks (that can also be developed from previous survey finding examples and situations). Development of an easy to use toolkit that contains regulations, resources, and guides for surveyors, and knowledge of Accreditation Organization (AO) standards and practices (this could be achieved using a presentation/recorded webinar developed by the AOs available on demand). Regarding competencies, development of a detailed competency check list for new surveyors. Supervisors could use elements of the competency check list as part of their observations of newer surveyors' activity during a survey. Specific time periods for supervisor observational ride along would be established with newer surveyors. Additionally, NHPCO has advocated for statutory and regulatory changes that would equip CMS with the ability to include additional standardized computerized programs for training, education and competency evaluations for hospice surveyors to ensure knowledge of hospice regulations and consistency of surveys.

- 2) CMS data indicates that almost 50% of hospices are Medicare certified using an Accreditation Organization rather than being surveyed by the State Agency, yet most hospice surveys triggered by a Complaint are surveyed by the State Agency surveyor. Accreditation Organizations undergo a rigorous approval and oversight process by CMS – specifically for the hospice survey rules – and Accreditation Organizations are available in every state.

Question 2: Based on these facts, Accreditation Organizations appear to be underutilized for hospice complaints. How can Congress and/or CMS expand the use of Accreditation Organizations for surveys triggered by complaints for the almost 50% of hospice providers that achieved Medicare certification by Accreditation Organizations?

Answer 2: While the State Survey Agency (SA) must respond immediate jeopardy, patient harm and condition level complaints, NHPCO would support the use of the Accreditation Organization (AO) for non-immediate jeopardy medium and low priority complaints.